

## STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF NATURAL RESOURCES

JEFFREY R. VONK, DIRECTOR

Date: 2/16/05

To: OHV Project Sponsors

From: David Downing

RE: All-Terrain Vehicle Grant Application (April 2005)

Attached is the application for the April 2005 cost-share program along with a copy of the current rules governing participation.

If you have an outstanding grant that hasn't been extended and is more than sixty days past the project end date as stated in the grant approval letter, you are not eligible for more grant money. In order to be eligible, you will need to submit closeout paperwork to Kathleen Moench or request that the original grant be extended. It is your responsibility to insure that your grant has been extended. If you fail to extend the grant, the funds may be directed back into the cost-share account for future projects.

If you have any questions regarding the application, please call me at 515 281-3449. Remember, applications are due in my office on or before April 15, 2005. Applications received after the deadline will be returned to the submitting sponsor and shall not be considered for cost-share funding during the current grant cycle.

## 2005 APRIL ATV PROJECT APPLICATION

This application constitutes a formal request for a cooperative agreement to acquire, develop or maintain an All-Terrain Vehicle Facility. The <u>original</u> completed application and <u>five</u> copies must be submitted and received by the lowa Department of Natural Resources by April 15, 2005 to be considered for funding.

Mr. David L. Downing
ATV Program Coordinator
Department of Natural Resources
Wallace State Office Building
Des Moines, Iowa 50319-0034

Phone: 515/281-3449

Submitted By:

Return to:

| Submitted by.                |                         |                           |                            |  |
|------------------------------|-------------------------|---------------------------|----------------------------|--|
|                              |                         | Date:                     | //                         |  |
| Agency or Club Name          |                         |                           |                            |  |
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| Signature of Chairperso      | n or President Prin     | ited Name of Chairp       | person or President        |  |
| (H) (W)                      |                         |                           |                            |  |
| Phone Numbers                |                         | E-mail                    | <del></del>                |  |
| 2 110110 1 (01110 010        |                         |                           |                            |  |
| Alternate Contact Inform     | nation (include name    | , address, telephone      | e & e-mail information)    |  |
| If more than one agency      | v or organization is in | <br>nvolved with this nro | pject, please complete the |  |
| required information fo      |                         |                           | sjoot, proude comprete and |  |
|                              |                         | Date:                     | //                         |  |
| Agency or Club Name          |                         |                           |                            |  |
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| Street or P.O. Box           | City                    | State                     | Zip                        |  |
|                              |                         |                           |                            |  |
| Signature of Chairperso      | n or President Prin     | ted Name of Chairr        | person or President        |  |
| olgitature of Chairperso     | iror resident i ili     | ited Name of Onamp        | berson or i resident       |  |
| (H) (W)                      |                         |                           |                            |  |
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| Alternate Contact Inform     | nation (include name    | , address, telephone      | e & e-mail information)    |  |
| Type of Project: Acquicit    | ion Developme           | ont Mainton               | anno 8 Operations          |  |
| Type of Project: Acquisit    | ion Developme           | in linen                  | ance & Operations          |  |
| Name of Area:                |                         |                           |                            |  |
|                              |                         |                           |                            |  |
| Location of Area             | Tarres ale la           | N. Danas                  | of the File D.M.           |  |
| County Section               | , I ownship             | N, Range _                | of the 5th P.M.            |  |
| FOR DEVELOPMENT O            | R MAINTENANCE PR        | OJECTS ONLY               |                            |  |
|                              |                         | 7                         |                            |  |
| Project site control: (check |                         | Lease                     |                            |  |
|                              |                         | ement Agreement           |                            |  |
| Expiration date of lease,    | easement or agreemer    | nt:                       |                            |  |

## IN ORDER TO BE CONSIDERED FOR FUNDING, THE GRANT REVIEW AND SELECTION COMMITTEE WILL NEED THE FOLLOWING ITEMS

- (A) Brief narrative describing the work to be done and an anticipated work schedule. Photographs of proposed project areas are encouraged to provide more detail.
- (B) Itemized breakdown of materials list. This list should include construction materials for trail work. It should also include fuel, parts and other similar expenses needed to operate and maintain equipment.

  Include the amount requested for each material. All material list for purchases over \$500 should include (3) bid prices whenever possible.
- (C) Itemized breakdown of labor expenses to include the type of project or maintenance activity being performed with the amount requested for each activity.
- (D) Contract items. Describe the service to be provided in detail (trail work, road / parking area work, equipment work, law enforcement services or other contract labor) Include the terms of the contract and the amount requested for each contracted item. For contracted projects, it is the grant applicant's responsibility to obtain a minimum of (3) bids. Remember, you will be responsible for sales tax, so if the bid doesn't account for this, make sure you've requested enough to cover for it.
- (E) Equipment purchase / lease. Indicate the type of equipment to be leased or purchased and the work the equipment will be completing. Include the price of the equipment with (3) supporting bids for equipment purchases. For lease, include the conditions of the lease (if known) and the supplier of the equipment.
- (F) Other. If you are requesting funding for any other expense. List these requests here. Be specific with the amount listed for each item requested.
- (G) Prepayment. If you are requesting prepayment and are not a political subdivision of the state, the chairperson and treasurer of your organization need to be bonded before a prepayment check can be awarded.

| Total request for item "B"                  |  |  |  |  |  |
|---|--|--|--|--|--|
| Total request for item "C"                  |  |  |  |  |  |
| Total request for item "D"                  |  |  |  |  |  |
| Total request for item "E"                  |  |  |  |  |  |
| Total request for item "F"                  |  |  |  |  |  |
| TOTAL GRANT REQUEST (add items B,C,D,E & F) |  |  |  |  |  |

Please be sure to provide enough information with the application to describe what development activities will be taking place; including the amount and cost of materials. If there is additional information that you think will help the grant review and selection committee explain your group's needs, please include it. Maps and other supporting documents are encouraged by the review and selection committee.